BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number RD 0 9803/53 /15-38 - 0113																		
														CLAIMS AS FILED - PART I								L EI	NTITY		OTHER	THAN
														(Column 1) (Column 2)							TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			24				RAT	RATE FEE			RATE	FEE														
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 355.0		OR	BASIC FEE	710.00														
TOTAL CHARGEABLE CLAIMS			24 minus 20=		• 4		X\$ 9	X\$ 9=		OR	X\$18=	72														
INDEPENDENT CLAIMS			6 minus 3 =		3		X40=			OR	X80=	240														
MULTIPLE DEPENDENT CLAIM PRESENT							+135	5=		OR	+270=	-														
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT	AL		OR	TOTAL	1027															
CLAIMS AS AMENDED - PART II											OTHER															
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMA	LL	ENTITY	OR	SMALL															
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE X\$ 9=	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE														
	Total	*	Minus	**		=)=		OR	X\$18=															
	Independent	*	Minus	***	· · · · · · · · · · · · · · · · · · ·	=	X40)=		OR	X80=															
L	FIRST PRESE	JLTIPLE DEF	PLE DEPENDENT C			+135	 5=		OR	+270=																
								TAL			TOTAL															
,					_,		ADDIT.			OR	ADDIT. FEE															
		(Column 1) CLAIMS		(Colu		(Column 3)	r		ADDI	l 1		4881														
AMENDMENT B	1	REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE														
	Total	•	Minus	**		=	X\$ 9)=		OR	X\$18=															
	Independent	<u> </u>	Minus	***		=	X40	=		OR	X80=															
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.105				+270=															
							+135	TAL		OR	TOTAL															
							ADDIT. I		<u> </u>	OR	ADDIT. FEE	L														
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST																									
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE														
	Total	•	Minus	**		=	X\$ 9)=		OR	X\$18=															
	Independent	*	Minus	***		=	X40:	 _		OB	X80=	 -														
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR		_														
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=															
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE																										
		mber Previously Pa					found in th	0 ar:	oropriato bos	v in col	lumn 1															